

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>7/31/07</u>		2 Serial/Patent # <u>10/026,482</u>	
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/> Filing			\$
<input type="checkbox"/> Amendment			\$
<input checked="" type="checkbox"/> Extension of Time		<u>4/23/07</u>	\$ <u>1020.00</u>
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>1020.00</u>
		8 TO BE REFUNDED BY:	
		<input checked="" type="checkbox"/> Treasury Check	
		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
		9 50--0911	
10 REASON:			
<input type="checkbox"/> Overpayment			
<input type="checkbox"/> Duplicate Payment			
<input checked="" type="checkbox"/> No Fee Due (Explanation):			
<u>Paid after maximum extendable period for reply.</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Kimberly Inabinet</u>		TITLE: <u>Petitions Examiner</u>	
SIGNATURE: <u>Kimberly Inabinet</u>		PHONE: <u>x24618</u>	
OFFICE: <u>Office of Petitions</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>CKH</u>		DATE: <u>8/9/07</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: